RESPIRATORY OUTBREAK MANAGEMENT CHECKLIST

For Congregate Living Settings

Refer to this checklist to manage outbreaks as per the Ministry of Health's protocols and the Windsor-Essex County Health Unit (WECHU) recommendations. Retain for your records.

Setting Name:	**Outbreak #:** **2268 - -**	**Date:**

Outbreak Declaration: ☐ Suspect ☐ Confirmed

Affected Area: Entire living setting ☐ OR Name of unit(s)/floor(s):

Case definition: determined by the WECHU (Click here or visit wechu.org)

☐ Abnormal temperature	☐ New/worsening cough	☐ Shortness of breath
☐ Nasal congestion/runny nose	☐ Sore throat/hoarseness	☐ Loss of taste/smell
☐ Malaise/fatigue	☐ Headache	☐ Other: _____

CONTACT

Identify the designated WECHU nurse for your outbreak:

Nurse Name: _____ **Phone #:** 519-258-2146 ext._____

☐ For any questions or concerns please contact your designated nurse or the Infectious Disease Prevention department (IDP) at **519-258-2146 ext. 1420.** The WECHU business hours are from 8:30am - 4:30pm Monday to Friday. Contact the After-Hours hotline at **519-973-4510** to speak with on-call personnel outside of WECHU business hours.

IMMEDIATE ACTIONS

If someone residing in the setting is symptomatic: *More information on these steps below	Individual should reman in their room.
	Implement **additional precautions** (i.e., contact/droplet), if possible.
	Provide any necessary **medical assessments.**
	Test for COVID-19 or other respiratory illness.

TESTING

☐ Ensure there is a plan in place to test individuals residing in the setting for pathogens in accordance with internal policies and procedures. Refer to the PHO's Kit and Test Ordering Instructions or the Respiratory Viruses (including influenza) webpages for more information on testing procedures.

☐ Consult with your WECHU outbreak nurse and a primary care provider for more information on specific test types and lab requisitions.

LINE LISTS

☐ Create a line list of ill individuals who belong to the outbreak (click here to download the line list or visit wechu.org).

*Only include those on the line list who meet case definition (see above).

☐ Update and fax line lists **daily** to the WECHU **by 10:00 am** to fax #519-977-5097.

COMMUNICATION

☐ Post outbreak signage at all entrances of building.

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☐	Notify all staff, students, volunteers, families and visitors of the outbreak. The WECHU will send your setting an **Advisory Notice** to reflect the current outbreak. An **Outbreak Notification** will be posted on the WECHU website alerting others of a current outbreak in a congregate living setting, however identifying details such as the name of the setting and the address will not be disclosed.
☐	Convene an Outbreak Management Team (OMT) and meet daily to review the status of the outbreak and communicate updates to the WECHU.
	PUBLIC HEALTH INSPECTOR
☐	Identify the designated Public Health Inspector (PHI) from the WECHU for your setting, if applicable: **PHI Name**: _____ **Phone #:** 519-258-2146 ext._____ Your Public Health Inspector (PHI) may reach out to conduct a site visit.
	IPAC OUTBREAK MEASURES
☐	Refer to WECHU IPAC Hub website and the following Ministry of Health documents for additional resources related to outbreak control measures: Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings – February 2025, or as current. Appendix 1: Ontario Public Health Standards, Respiratory Infection Outbreaks in Institutions and Public Hospitals – September 2025.

☐	Outbreak Education	Provide education to those in the setting about outbreak control measures, such as proper use of masks, cleaning hands, and reporting any new symptoms to staff.
☐	Case Control Measures	Symptomatic individuals should remain in their room and cohort cases (i.e., limit movement of individuals between outbreak areas and non-outbreak areas) where/when possible.
		Refer to Section 7.3 of the *Infection Prevention and Control (IPAC) and Outbreak Management in Congregate Living Settings* document for more information.
☐	Additional Precautions	All positive cases should be placed on **droplet and/or contact precautions** in addition to routine practices. Refer to Section 2.0 of the *Infection Prevention and Control (IPAC) and Outbreak Management in Congregate Living Settings* document or PHO's Routine and Additional Precautions webpage for more information.
		Post additional precautions signage on the door of case rooms, when possible.
☐	Staff/Student/ Volunteers Control Measures	Minimize movement of staff/students/volunteers between affected and unaffected areas as much as possible (i.e., cohort staff).
		Exclude ill staff/students/volunteers **until symptoms have been improving for 24 hours and no fever present** or longer if indicated by internal policies. Upon return to work, staff should mask and avoid caring for highest risk individuals for **10 days** from symptom onset or test date (whichever is earlier).
		Refer to your internal policy regarding **unvaccinated** staff/students/volunteers during influenza (flu) outbreaks. **Exclusion is strongly recommended** if unvaccinated and not on antiviral prophylaxis.

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☐ Visitor Control Measures	Restrict visitors to essential caregivers in affected areas.
	Ensure those who do visit: • Are screened for signs and symptoms of illness. • Practice vigilant hand hygiene. • Visit individuals in their rooms and avoid communal areas. • Visit only one individual; do not mingle with others. • Use appropriate PPE especially if providing direct care.
	Ill visitors should be advised not to visit while they are ill and wait until symptoms have ended.
☐ Increased Environmental Cleaning	For more information, refer Section 5.1 of the *Infection Prevention and Control (IPAC) and Outbreak Management in Congregate Living Settings* document or to PHO's Best Practices for Environmental Cleaning – April 2018, or as current.
☐ Hand Hygiene	Ensure proper handwashing is maintained by everyone in the setting by providing ample supply of soap and 70-90% alcohol-based hand sanitizers (e.g., where sinks are not readily available).
☐ PPE	Ensure proper PPE, for example, masks (N95 where applicable), gloves, gowns and eye protection, are available and accessible throughout the setting.
	Provide a **container for soiled PPE/linen**: • If the container is located *inside* the individual's room, the container must be a **minimum of 6ft** or more away from the individual's bed. • If not possible, place the container *outside* the room a **minimum of 6ft** away from any clean linen. *Ensure alcohol-based hand sanitizer is available by the container.
	Refer to Section 2.0 and Section 7.3 of the Infection Prevention and Control (IPAC) and Outbreak Management in Congregate Living Settings document for more information on the required PPE for a respiratory outbreak.
☐ Auditing	Increase audits of staff practices (e.g. hand hygiene, cleaning, use of PPE, etc.).
☐ Dietary	Ensure there is a dining policy in place to separate exposed and unexposed individuals.
	Provide in-room tray service meals within the outbreak area, if available. **Ensure the staff who deliver meals are practicing proper hand hygiene in between rooms.**
☐ Activities	Reschedule communal activities in the affected area(s).
	Exceptions regarding non-outbreak units/floors should be discussed with the OMT involving outside groups such as entertainers, volunteer organizations, and community groups.

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☐ Admissions/ Readmissions & Transfers	Limit, if possible, when a new outbreak has been declared. For specific guidance on admissions/readmission/transfers, refer to **Section 3.5 and 3.6** of the Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings – February 2025, or as current.
☐ Medical/Other Appointments	If possible, reschedule non-urgent appointments until outbreak is over.
	Symptomatic clients/residents/patients should wear a mask (as tolerated for respiratory illnesses) and the receiving facility should be notified of the outbreak.
ANTIVIRALS	
☐ Consult with a primary care provider to check if an individual is eligible to take medications for COVID-19 or influenza/the flu (called *an i-viral medica ions*). More information can be found in **Appendix B: Antivirals/Therapeutics** of the Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings – February 2025, or as current.	
Signature and Designation:	**Date:**